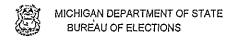
CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

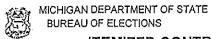
Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.	3. This Statement covers From: 5-7-14 to 7-20-14
1. Committee I.D. Number	4. Candidate Last Name First Name M.I.
150696	Meylan Edward A. 4a. Office Sought Including District # or Community Served (If applicable)
2. Committee Name	
Ed Meylan tot Road	4b. County of Residence SAM
5, Committee's Mailing Address	6. Treasurer's Name & Residential Address
11615.8171/4RJ	Same
HOW T. 48631	
Area Code and Phone 39-039-0 If the address in this box is different from the committee mailing address on the Statement of Organization, mail may be sent to this address by the filing official.	Area Code & Phone
7. Treasurer's Business Address	
7. Treasurer's business Address	8. Designated Record keeper's Name and Mailing Address (If the committee has a Designated Record keeper)
Some	
	1/0/14
	1 28 2
Area Code and Phone	Area Code and Phone
9. TYPE OF STATEMENT	7.560 6560 410 7.1010
9a. Pre-Election OR 9b. Post-I	t-Election 9c. Annual Statement (Soverage Year)
Pre-Election or Post-Election Statement relates to:	9d. Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended)
	9e. Dissolution of Candidate Committee
Gene Gene	
Convention	ool Effective Date of Dissolution
Special Caucu	ous and the state of the state
	By checking this item, IWe certify that the committee has no assets or outstanding debts, including late filing fees. Further, IWe request that if
Date of Election, Convention or Caucus	the dissolution cannot be granted, that this be considered a request for the Reporting Waiver.
Hug- 3-14	Note: The disposition of residual funds must be reported on Schedule
A committee that does not have a Reporting Waiver must file all requ	1B and the Summary Page.
Schedules. Direct contributions, in-kind contributions, loans, expend if any of the information listed in Items 2, 4, 5, 6, 7, or 8 has changed amendment to the Statement of Organization should accompany this before the filing deadline of a required campaign statement, that	quired Campaign Statements. The Campaign Statements must include all applicable iditures, and outstanding debts count against the \$1,000 Reporting Walver threshold. et since the information was shown on the committee's Statement of Organization, and is Campaign Statement. If a request for a Reporting Walver is not received on or at campaign statement cannot be walved.
10. Verification: I/We certify that all reasonable diligence was used in my/our knowledge and belief the contents are true, accurate and com-	n the preparation of this statement and attached schedules (if any) and to the best of inplete.
	0/100/
Current Treasurer or Designated Record keeper Ed Meylan 1	Date 2 29-14
Type or Print Name /	Signature
FI Maulan	El M. / 120-111
Candidate ////////////////////////////////////	Signature Date



SUMMARY PAGE

1. Committee I.D. Number	150	Ce 9 Co	
	7		

2. Committee Name Ed Meylan for Road Comm. CANDIDATE COMMITTEE RECEIPTS Column I Column II Cumulative this election cycle This Period 3. Contributions (3a.) \$ <u>/000</u>* a. Itemized (Schedule 1A - Column 6) b. Unitemized (less than \$20.01 each - no Schedule) (3b.) \$ NOT APPLICABLE c. Subtotal of "Contributions" 4. Other Receipts (Schedule 1A -1, Column 6) (4.) \$ (19.) \$ ____ 5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (20.) \$ ____ (Add Line 3c + Line 4) **IN-KIND CONTRIBUTIONS & EXPENDITURES** 6. In-Kind Contributions (Schedule 1-IK, Column 7) (21.) \$ ___ 7. In-Kind Expenditures (Schedule 1B-IK, Column 6) (22.) \$_ EXPENDITURES 8. Expenditures (8a.) \$ <u>BO</u> a. Itemized (Schedule 1B, Column 6) (8b.) \$ ____ b. Itemized Get-Out-the-Vote (Schedule 1B-G) (8c.) \$ ____ c. Unitemized (less than \$50.01 each - no Schedule) 9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c) (23.)\$ INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only) 10, Disbursements a. Itemized (Schedule 1C, Column 6) (10a.) \$ b. Unitemized (less than \$50.01 each - no Schedule) 11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b) (11.) \$ (24.) \$_ DEBTS AND OBLIGATIONS 12. Debts and Obligations a. Owed by the Committee (Schedule 1E) b. Owed to the Committee (Schedule 1E) (12b.) \$ BALANCE STATEMENT 13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.) 14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts) 15. SUBTOTAL Add lines 13 and 14 16. Amount expended during reporting period (Add lines 9 and 11) 17. ENDING BALANCÉ (Subtract line 16 from line 15)



ITEMIZED CONTRIBUTIONS SCHEDULE 1A

CANDIDATE COMMITTEE

1. Committee I.D. Number	1506	96_	
2. Committee Name	Meylan	for	ROD COMBISSIE

		COMMINITEE		2. Committee Name		0
Enter contributor's name and address. If contribution is from an Individual, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee (PAC) Report all contributions regardless of amount.				6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)	
5. If over \$100.00 cu	PAC Receipt PAC Receipt PAC Receipt PAC Receipt PAC Receipt	LI Rd	Rece	elipt <u>7-3-14</u>	\$ <i> 000</i>	s //OOO
Occupation Re7	1140	Employer		 _		
Business Address		_/		-		
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution #2 Name & Address	PAC Receipt?	YES 4. Date of I	Recei	pt		
				,	\$	\$
5. If over \$100.00 cun	nulative, please pro	ovide:			Click Here fo	r Memo Itemization
Occupation		_ Employer				
Business Address		·				
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
3. Contribution # 3 Name & Address:	PAC Receipt?	YES 4. Date of i	Recel	pt		
					\$	\$
5. If over \$100.00 cum	ulative, please pro	vide:			Click Here for	Memo Itemization
Occupation		Employer				
Business Address						
Type of Contribution:	Direct	Loan from a person	Ш	Fund Raiser		
3. Contribution # 4 Name & Address	PAC Receipt?	YES 4. Date of I	Recei	pt		
					\$	\$
5. If over \$100.00 cum	ulative, piease pro	vide:		•	Click Here for	Memo Itemization
Occupation		Employer				_
Business Address						
Type of Contribution:	Direct	Loan from a person		Fund Raiser		
				Page Subtotal	1000-	

Grand Total of All Schedules 1A (Complete on last page of Schedule)

Enter this total on line 3a of Summary Page.

Page _____ of ____



ITEMIZED EXPENDITURES SCHEDULE 1B CANDIDATE COMMITTEE

1. Committee J. D. Number 1500	9 Ce.
2 Committee Name Ed Meylan	totand Compites low

	2. Committee Name Partie 710	ne competions
3. Name and address of person or vendor to whom paid	4. Purpose (Required Information)	5. Date 6. Amount
Expenditure #1		
Name ArT by Carney	<i>أ</i> .	12-14
		12-14 \$ 50-
Address 3430 Beise/ Ad	Purpose: <u>5/9/15</u>	
Baylity MI. 48704	. Click Here	e for Memo Itemization Type
Bayon	Check box if this expenditure is payment of	•
Fund Raiser	debt or obligation reported on previous -	
Expenditure #2	statement	•
		•
Name	<u>.</u>	s ·
	1	Date
Address	Purpose:	
	Click Here	for Memo Itemization Type
	<u> </u>	
——————————————————————————————————————	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #3		
Name	·	
•		<u> </u>
Address	Purpose:	Date
	Citate Linna	arkfama Hamiluatlan Tura
	 	or Memo Itemization Type
·	Check box if this expenditure is payment of debt or obligation reported on previous	
Fund Raiser	statement	
Expenditure #4		
Name		
		 \$
Address	Purpose:	Date
•		•
	Click Here fo	r Memo Itemization Type
	Check box if this expenditure is payment of	
Fund Raiser	debt or obligation reported on previous	
······································	statement	
expenditure #5		
Vame	•	•
Address	Purpose: Do	\$
nuuress .	Purpose:	
	Click Here fo	r Memo Itemization Type
	Check box if this expenditure is payment of	.]
Fund Raiser	debt or obligation reported on previous	
]	statement	
•	Subtotal this	page 50-
	Grand Total of all Schedu	
	(Complete on last page of Sch	

Enter this total on line 8a of Summary Page

Page _____ of ____



DEBTS AND OBLIGATIONS 1. Committee I.D. Number 150696

SCHEDULE 1E	TIM	a la tolo		/ / 6/
CANDIDATE COMMITTEE 2.	Committee Name Ed 17	Teylan tok Ro	oud COM	7M155104
This Schedule Itemizes:				
a Debts and obligations owed by or forgiven the cor (Ch.	mmittee OR b. Deb	ts and obligations owed <u>to</u> c urpose checked.)	or forgiven <u>by</u> the co	mmittee.
Name and Mailing Address of person, vendor or financial institution to whom debt is owed. Check box to indicate whether debt is owed to an incorporated business. If debt is a bank loan, please	4. Type of Obligation (Description) 5. Indicate date debt was incurred 6. Indicate original amount	7. Date and amount of each payment	8. Cumulative payment to date on debt	9. Outstanding Balance at close of this period (Item 6 minus Item 8)
provide information regarding the endorsers or guarantors, if any.	of debt			
Debt #1 Corp? Yes Owed to or by:	4. Type: 100 A	<u>O</u> s		
Ed Meylan 11615-8 Mile Ad	5. Date Debt Was Incurred:	s		
Hawk 48631	6. Original Amount of Debt:	- <u>\$</u>	\$	\$ 1000
	\$ 1000	` (FORGIVEN
If bank loan, name of endorser or guarantor:		Amo	unt Endorsed: \$	
Debt #2 Corp? Yes Owed to or by:	4. Type:	\$		-
·	5. Date Debt Was Incurred:	\$		•
	6. Original Amount of Debt:	\$	s	\$
	\$	<u> </u>		FORGIVEN
		<u> </u>		
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
Debt #3 Corp? Yes Owed to or by:	4. Type:	\$		
	5. Date Debt Was Incurred:	\$		
	6. <u>Original Amount of Debt</u> :	\$		s
	\$	\$	٠ ا	FORGIVEN
		<u> </u>	. :	I OKOIVEK
If bank loan, name of endorser or guarantor:		Amo	ount Endorsed: \$	
				1000 -
		Page Subtotal (C	- '1	1000 -
(Cor	mplete on last page of Schedule sho	owing amounts owed by or t		Enter this total
A daht as abligation must be about as this 2-1-1-1-	If there was an autotau din			on ilne 12a "owed by" or line 12b
A debt or obligation must be shown on this Schedule this Campaign Statement or it was forgiven during the			_	'owed to" of the Summary Page
Page of				